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### **Governor Gilmore Announces Department of Justice Dismissal of Case Against Northern Virginia Mental Health Institute**

RICHMOND - Governor Jim Gilmore today announced that the U.S. Department of Justice (DOJ) has agreed to dismiss the case against the Northern Virginia Mental Health Institute (NVMHI) in Falls Church. The joint motion to dismiss was filed Tuesday with the U.S. District Court in Alexandria. DOJ initiated an investigation of the state operated 127-bed mental health facility in 1994 under the federal Civil Rights of Institutionalized Persons Act.

"When I took office, I made a commitment to improve the quality of care in state mental health facilities, and this action affirms that we have kept that commitment," said Governor Gilmore. "Under the leadership of Department of Mental Health, Mental Retardation and Substance Abuse Services Commissioner Richard Kellogg, NVMHI Director Dr. Mohamed El-Sabaawi, and the dedicated NVMHI staff, dramatic changes have taken place at the facility. They have focused on effective medical practices with an emphasis on quality patient care."

Among the accomplishments at the facility, cited by DOJ:

- Development of a truly interdisciplinary treatment planning process focused on individualized treatment, with the effective inclusion of the patients themselves.
- "Profound progress" in developing a strong medical staff which is integrated with other clinical disciplines, and clinical staff which is well-coordinated with the administration of the facility.

- Full staffing of the medical staff, as well as a "level of stability unprecedented in the recent history of the facility." There are 12 full-time psychiatrists, not including the facility director, who is also a psychiatrist. The primary care service has stabilized. The result is the equivalent of approximately four full-time internists, as well as one full-time nurse practitioner, providing around the clock primary care coverage.
- Data indicate that the hours of seclusion use at NVMHI have reached extraordinarily low levels, compared with both state and national benchmarks. Neither seclusion and restraint nor time out are being used as elements of treatment plans at the facility.
- With regard to discharge planning and community placement, recent new policy changes by the Commissioner have resulted in greater clarity in the relative roles of the community services board and the facility, with greatly improved effectiveness in discharge planning. Multiple staff members cited an improvement in these working relationships that is beneficial to the patients.

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